UTILITY							
PATENT APPLICATION							
TRANSMITTAL							

Attorney Docket No.		ATUL001	
First Inv	rentor	ATUL THAKKAR et al.	To
Title	SYSTEM ANI	U.S. P	
Expres	ss Mail Label N	о.	15

(Only for new nonprovisional applications under 37 CFR 1.53(b))

I hereby certify that this α 23, 2003.		e United States Patent and Trademark Office in Washington, D.C. on June					
	ICATION ELEMENTS O concerning utility patent application contents.	Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC 20231					
2. Submit an original, and Applicant claims see 37 CFR 1.27. 3. Specification (preferred arrangement - Descriptive title of the Cross Reference to F statement Regarding	[Total Pages 2]] set forth below) e Invention Related Applications g Fed sponsored R & D noe listing, a table, or a sting appendix ivention e Invention he Drawings (if filed)	Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC 20231 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (If applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper c. Statements verifying identify of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s))					
- Abstract of the Disclo	214	to. token them to an assistant					
5. Oath or Declaration	on [Total Pages 🗾]	Information Disclosure Statement Copies of IDS					
a. 🗷 Newl	y executed (original or copy)	13. Preliminary Amendment					
i. 🔲 (for $\dot{\alpha}$	r from a prior application (37 CFR 1.63(d)) ontinuation/divisional with Box 18 completed) DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)	14. Return Receipt Postcard (MPEP 503) Should be specifically iterrized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.					
6. 🗷 Application Data S	Sheet. See 37 CFR 1.76	17. Other					
under 37 CFR 1.76: Continuation Prior application information: For CONTINUATION OR DIVISIONA	Divisional Continuation-in-part (CII) Examiner * L APPS only: The entire disclosure of the prior application and is hereby incorporation.	P) of prior application No: * Group / Art Unit: * ion, from which an oath or declaration is supplied under Box 5b, is considered a part of the orated by reference. This incorporation can only be relied upon when a portion has been					
madvariantly only and many days		ONDENCE ADDRESS					
Customer Number or Bar (or Correspondence address below					
Name	Atul Thakkar						
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Name (Print/Type)	Atul Thakkar	Registration No. (Attorney/Agent)					
Signature		Date June 23, 2003					
	Wit I of						

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FEE TRANSMITTAL FOR FY 2003

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C mplet if Kn wn						
Application Number	NEW APPLICATION					
Filing Date	June 23, 2003					
First Named Inventor	Atul THAKKAR					
Examiner Name	To Be Assigned					
Group Art Unit	To Be Assigned					

TOTAL AMOUNT OF PAYMENT					(\$)*	Attorney Docket No.			ATUL001				
METHOD OF PAYMENT			FEE CALCULATION (continued)						_				
The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:			3. ADDITIONAL FEES										
Deposit Account Number	es and credit ar	iy overpay	ments to.		Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee (Description		Fee Paid	
Deposit Account												1	
Name				1051	130	205	65	Surcharge - late filing fee or oath Surcharge - late provisional filing			<u> </u>	ł	
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17			1052	50	227	25	fee or cover sheet						
Applicant claims small entity status. See 37 CFR 1.27			1053	130	139	130	Non-English specification						
2. 🗷 Payment Enclosed: for \$375.00			1812	2,520	147	2,520	For filing a request for ex parte reexamination						
☑ Check ☐ Credit Card ☐ Money Order ☐ Other				1804	920*	112	920*	Requesting publication of SIR prior to Examiner action					
	FEI	E CALCU	ILATION		1805	1,840*	113	1,840*	Requesting publication of SIR after Examiner action				
1. BASIC	FILING FEE				1251	110	215	55	Extension for reply within first month]
Large	Entity Small	Entity			1252	400	216	200	Extens month	sion for reply withi	in second		
Fee Code	Fee Fee (\$) Code	F99 (\$)	Fee Description		1253	920	217	460	Exten: month	sion for reply withi	in third		
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1001	750 2001	375	Utility filing fee	375.00	1255	1,960	228	980		sion for reply withi	n fifth month		
1002	330 206	165	Design filing fee	\vdash	1401	320	219	160		of Appeal	-¢		l
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			Provisional filing							est for oral hearing n to institute a pul			f
1005	160 214	80	fee		1451	1,510	138	1,510	procee		blic use		
					1452	110	240	55	Petitio	n to revive - unav	oidable		
		SU	BTOTAL (1) (\$)3	75.00	1453	1,280	241	640	Petitio	n to revive - unint	entional		
2. EXTRA	CLAIM FEES	Poster	Face from		1501	1,280	242	640	Utility	issue fee (or reiss	sue)		
		Extra Claims	Fee from below	Fee Paid	1502	460	243	230	Design	n issue fee			
	20 -20** =	•	х =	\$	1503	620	244	310	Plant i	ssue fee			
Independent Claims	3 - 3** =	•	х =	\$	1460	130	122	130	Petitio	ns of the Commis	sioner		
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Large Fee Code	Fee Fee (\$) Code	Entity Fee (\$)	Fee Description		8021	40	581	40		ding each patent a operties (times nu ties)			
1202	18 203	9	Claims in excess of 2	20	1809	740	246	370	Filing a submission after final rejection		_		
1201	84 202	42	Independent claims I	n excess of 3	1810	740	249	370	For ea	FR § 1.129(a)) ch additional inve ned (37 CFR § 1.1			
1203	280 204	140	Multiple dependent o	taims, if not paid	1801	740	279	370	Reque	st for Continued E			
1204	84 209	42	**Reissue Independe		1802	900	169	900	(RCE) Reque	st for expedited e	xamination		
			original patent **Reissue claims in e	xcess of 20 and	.002	000	,,,,	****	of a de	sign application			i
1205	18 210	9	over original patent		Other fee	(snacify)					1		.
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** or number previously paid, if greater; For reissues, see above.			*Reduced	*Reduced by Basic Filing Fee Paid SUBTOTAL (3)			(3) (\$)						
SUBMITTED BY										Complete (if ap	plicable)		
Name (Print/Type) Atul Thakkar					tration No ney/Agen		(regno)		Telephone	(301) 279	-7933		
Signature ////////////////////////////////////								Date	June 23, 2	2003			

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